

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Black PAC		FEC IDENTIFICATION NUMBER ▼ C C00609388
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Break Something Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2020
Mailing Address 1701 Rhode Island Ave NW FI 5		Amount 426.46
City Washington	State DC	Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements - Estimate	Category/ Type	Transaction ID : VTDG0AEHKJ7 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Trump, Donald, J., ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 1135466.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Break Something Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 22 / 2020
Mailing Address 1701 Rhode Island Ave NW FI 5		Amount 426.47
City Washington	State DC	Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements - Estimate	Category/ Type	Transaction ID : VTDG0AEHKK5 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Tillis, Thom, R., ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 19074.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	852.93
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

MM / DD / YYYY
07 / 22 / 2020

Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 21 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 230094.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEHJ21		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Peters, Gary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 21 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 4737.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEHJ39		
Purpose of Expenditure Media Production - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Peters, Gary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	234831.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 21 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 292894.33		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEHKKF4		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		1135466.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 21 / 2020		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 4737.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEHKKH9		
Purpose of Expenditure Media Production - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		1135466.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	297631.33
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	533315.26

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